

POTENTIAL STUDY PLAN

HEALTH SYSTEM REFORM TASK FORCE, 2009

SIX AREAS OF NEED	TOPIC	STATUTORY CHARGE (2009 H.B. 188)	POTENTIAL STUDY QUESTIONS	TASK FORCE/ WORKING GROUP
1. Insurance Reform	Portal	<ul style="list-style-type: none"> • Operation and progress • Role that PEHP and other self-insurance associations may play 	<ul style="list-style-type: none"> • Is the portal being developed and implemented in accordance with the intent of H.B. 133 and H.B. 188? <ul style="list-style-type: none"> – Is the information insurers are required to submit to the portal presented in a way that enables meaningful comparison of plans by consumers? – (Future) How many employers and employees are participating in the portal? What impact is that having on plan costs to employers and employees? How do plans offered in the portal compare with other plans? How could participation be increased? • Is the amount of plan information available in the portal sufficient for a consumer to make a purchasing decision based on that information alone? • What outcomes will have to be achieved for the portal to be considered a success? • What steps should be taken next to make the portal a vehicle for promoting the availability of affordable, portable, flexible plans? 	Oversight and Implementation

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	Defined Contribution Arrangement Market (DCAM)	<ul style="list-style-type: none"> Implementation of defined contribution arrangement market <ul style="list-style-type: none"> Selection of plans Large group participation Risk Adjuster Board plan 	<ul style="list-style-type: none"> Will the Risk Adjuster Board's plan maximize participation, portability, affordability, and flexibility in the DCAM? Does the Risk Adjuster Board need additional statutory guidance or authority to facilitate and maximize participation in the DCAM? What impact is the Office of Consumer Health Services having as it educates employers about defined contribution arrangements? (Future) Which employers and employees are participating in the DCAM? What impact is the DCAM having on affordability choice, and quality? What is being done to promote the use of commercial or nonprofit multi-source premium aggregators? 	Oversight and Implementation
	Payment Reform	<ul style="list-style-type: none"> Implementation of statewide demonstration projects to align incentives across system for appropriate delivery of care and payment Disincentives for use of most effective/efficient care created by insurance reimbursement policies 	<ul style="list-style-type: none"> What demonstration projects or other innovative approaches to purchasing health care are already under way in Utah and other states or countries? 	Affordability and Access
	Portability	<ul style="list-style-type: none"> Federal clarification of whether HIPAA, ERISA, IRC, and DOL allow an employee to use pre-tax contributions from an employer to purchase a plan that is separate from the employer group plan, owned by the individual, and fully portable 	<ul style="list-style-type: none"> Do federal agencies intend to provide additional clarification anytime soon? To what extent are individual plans being purchased with employer contributions in Utah and other states? What challenges, if any, have been filed in court or with regulators? What other challenges are possible? 	HSRTF

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2. Personal Responsibility	Wellness	<ul style="list-style-type: none"> Implementation and effectiveness of insurer wellness programs and incentives, including outcome measures Development of strategies for promoting health and wellness 	<ul style="list-style-type: none"> How much do wellness programs and incentives affect short and long-term insurance costs in the small group, large group, and self-insured markets? Why are programs and incentives not used more widely? 	Affordability and Access
3. Transparency and Value	Transparency	<ul style="list-style-type: none"> Mechanisms to increase transparency <ul style="list-style-type: none"> Pricing—pre-purchase availability Explanation of Benefits—more understandable Cost Sharing—use of standardized terms Pre-authorization—more efficient Overhead—availability of loss ratios and other measures Development of process to inform public of reasons for cost increases and treatment variation 	<ul style="list-style-type: none"> What can be done to accelerate the availability and use of risk-adjusted episode of care cost data? What can be done to accelerate the use of electronic health records and the electronic exchange of clinical health data? 	Transparency, Quality, and Infrastructure
4. Maximizing Tax Advantages	Multiple-source premium payments	NA	<ul style="list-style-type: none"> What has been done to facilitate multiple-source premium payments? 	Oversight and Implementation
5. Public Programs	Adequacy of Funding	<ul style="list-style-type: none"> Cost Shifting 	<ul style="list-style-type: none"> Amount, mechanisms, and reduction of public to private shift? 	Affordability and Access
6. Modernizing Governance	Government as purchaser	NA	<ul style="list-style-type: none"> How could the state use it's role as a major purchaser of health insurance (and a major funder of school districts which also purchase insurance) to encourage value-based (price, outcomes, other factors) purchasing of insurance and health care services? What can be done by the state to make Medicaid and PEHP model third-party payers? 	HSRTF Oversight and Implementation Transparency, Quality, and Infrastructure

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Other	Strategic Plan	Implementation of strategic plan	<ul style="list-style-type: none"> H.B. 133 called for development of a strategic plan for health care reform. <ul style="list-style-type: none"> Should the elements of the strategic plan be spelled out explicitly? If so, how? As a Task Force recommendation to the Legislature? As a resolution? By statute? Which elements of a strategic plan considered last year should receive further consideration this year? What else should be considered? H.B. 133 charges executive branch agencies with helping the Legislature develop a strategic plan. What recommendations do they have for the Task Force this year? 	<p>HSRTF</p> <p>← All working groups</p>
	Innovation	NA	<ul style="list-style-type: none"> What impact are "disruptive" innovations in health care having in Utah and elsewhere? Should these innovations be encouraged, and if so, how? In particular, what efforts are under way by existing hospitals, physicians, and insurers to disrupt their own operations with lower cost business models? 	HSRTF
	Focus	Sustaining public interest and involvement	<ul style="list-style-type: none"> What steps can be taken within the health care community and by the Legislature and the Governor to maintain public interest in health care reform? 	HSRTF
	Report	Final report to Business and Labor Interim Committee before November 30, 2009		HSRTF